



Fire Department

Fire & Building Safety Division

13065 Orono Parkway

Elk River, MN 55330

RENTAL DWELLING LICENSE APPLICATION

City Use Only

Date Received: _____

Registration Number: _____

Permit Number: _____

Section 1: Rental Dwelling Information

Dwelling Address: _____ Application: ☐ New

Dwelling Name: _____ ☐ Renewal

PID Number(s): _____

Type of Dwelling: ☐ Single Family ☐ Duplex ☐ Apartment ☐ Condo/Townhome

☐ Other (be specific): _____

Section 8 Housing: ☐ No ☐ Yes Other: _____

Year Built: _____ Number of Levels: _____

Section 2: Owner Information

Name of Owner: _____
Last (if a business, list business name) First MI

Address of Owner: _____
(Address cannot be a P.O. Box or commercial mailing service)

City State Zip

Work Telephone: _____ Date of Birth: _____

Home Telephone: _____

Cell/Other: _____

E-Mail Address: _____

If you wish correspondence to be sent to a different address, such as a P.O. Box, please list that address below:

Mailing Address: _____

City State Zip

Phone: 763.635.1060

Fax: 763.635.1090

www.ElkRiverMN.gov/Fire



Rental Property License Application

Section 3: Local Property Agent/Manager Information

Note: If this section is completed, all correspondence, including notice of violations, will be directed to the local agent.

Name of Agent: _____
Last (if a business, list business name) First MI

Address of Agent: _____
(Address cannot be a P.O. Box or commercial mailing service)

City State Zip

Work Telephone: _____ Date of Birth: _____

Home Telephone: _____

Cell/Other: _____

E-Mail Address: _____

If you wish correspondence to be sent to a different address, such as a P.O. Box, please list that address below:

Mailing Address: _____

City State Zip

Section 4: Multi-Unit Dwelling Layout Scheme

Use the grid below to identify the units on each floor, listing them from lowest to highest along with the unit type in the appropriate column. For larger buildings, please supply your own grid. Unit type examples: Studio, 1BR, 2BR, 3BR, etc.

Floor #		Floor #		Floor #		Floor #	
Unit #	Type	Unit #	Type	Unit #	Type	Unit #	Type

Section 5: Signature

I affirm by my signature below that I am in compliance with all rental dwelling licensing standards outlined in the City of Elk River Code of Ordinances, Chapter 30, Article III, Divisions 1-3 and understand that failure to comply with any of these standards and/or conditions shall be adequate grounds for the denial or refusal to issue or renew, or the revocation or suspension of my rental dwelling license. The owner shall notify the City of Elk River within thirty (30) days of transfer of ownership. The undersigned further agrees the subject dwellings may be inspected by the Fire Chief or his/her designee as outlined in the Code of Ordinances.

Signature of Owner

Date